FORM D

UNITED STATES
U.S. SECURITIES AND EXCHANGE
COMMISSION

Washington, D.C. 20549

SEC Mail Processing Section

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FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1//7/	00
OMB APF	PROVAL
OMB Number	3235-0076
Expires:	May 31, 2002
Estimated average	burden
hours per respons	
SEC USI	ONLY
Prefix	Serial
1	<u> </u>
DATE RE	CEIVED

144/GV/

Name of Offering (check if this is an amendment and name has changed, and inc	licate change.)	
Stonewood UI, LLC		
Filing Under (Check box(es) that apply): Rule 504 Rule 505 X Rule	506 Section 4(6) UL	OE
Type of Filing: New Filing		
A. BASIC IDENTIFICAT	ION DATA	
Enter the information requested about the issuer		1 184 (0. 1818 1 4 0. 1818 1 4 0. 1818 1 1 0. 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name of Issuer (check if this is an amendment and name has changed, and inc	dicate change.)	1 14 6 11 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Stonewood UI, LLC		08059681
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including .	
c/o Banner Property Management, LLC, 500 Skokie Blvd. #600,	(847) 501-5450	PROCESSED
Northbrook, IL 60062 Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including A	rea Code)
(if different from Executive Offices)	-	SEP 1 5 2008
		THE MOON DELITED
Brief Description of Business		THOMSON REUTER
Investment in 272-unit apartment complex located in Madison, Wisco	nsin,	
Type of Business Organization	_	
☐ corporation ☐ limited partnership, already formed	other (please	e specify): limited liability
☐ business trust ☐ limited partnership, to be formed		company
Actual or Estimated Date of Incorporation or Organization: Month Year	Actual Estima	ated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service at CN for Canada; FN for other foreign ju		
Civitor Canada, 114 for other foreign ju	11001011011) 11 1	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only reported the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA										
2. Enter the information requested for the following:										
 Each promoter of the issuer, if the issuer has been organized within the past five years; 										
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; 										
 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and 										
Each general and managing partner of partnership issuers.										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer of Manager Director Manager										
Full Name (Last name first, if individual)										
Gottlieb, David										
Business or Residence Address (Number and Street, City, State, Zip Code)										
c/o Banner Property Management, LLC, 500 Skokie Blvd., Northbrook, IL 60062										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Sole Member of GP										
Full Name (Last name first, if individual)										
Banner Apartments, LLC										
Business or Residence Address (Number and Street, City, State, Zip Code)										
c/o Banner Property Management, LLC, 500 Skokie Blvd., Northbrook, IL 60062										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Member of Sole Member of GP										
Full Name (Last name first, if individual)										
Milton Pinsky 2004 Trust										
Business or Residence Address (Number and Street, City, State, Zip Code)										
c/o Banner Property Management, LLC, 500 Skokie Blvd., Northbrook, IL 60062 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer of Manager☐ Director ☐ General and/or Managing Partner										
Full Name (Last name first, if individual)										
Milton Pinsky										
Business or Residence Address (Number and Street, City, State, Zip Code)										
c/o Banner Property Management, LLC, 500 Skokie Blvd., Northbrook, IL 60062										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Member of Sole Member of GP										
Full Name (Last name first, if individual)										
Martin Pinsky 2004 Trust										
Business or Residence Address (Number and Street, City, State, Zip Code)										
c/o Banner Property Management, LLC, 500 Skokie Blvd., Northbrook, IL 60062										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer of Manager Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Martin Pinsky										
Business or Residence Address (Number and Street, City, State, Zip Code)										
c/o Banner Property Management, LLC, 500 Skokie Blvd., Northbrook, IL 60062										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Member of Sole Member of GP										
Full Name (Last name first, if individual)										
David and Gail Pinsky Gottlieb 2004 Trust										
Business or Residence Address (Number and Street, City, State, Zip Code)										
c/o Banner Property Management, LLC, 500 Skokie Blvd., Northbrook, IL 60062										

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

		B. II	NFORMA	TION ABO	UT OFFER	UNG				
1.	Has the issuer sold, or does the issuer inter								Yes	No 🔀
2.	What is the minimum investment that will	be accepted f	rom any ir	ndividual?					\$ <u>58.00</u>	<u>0</u>
									Yes	No
3.	Does the offering permit joint ownership of	f a single uni	t?						×	
4.	Enter the information requested for each p or similar remuneration for solicitation of listed is an associated person or agent of a of the broker or dealer. If more than five set forth the information for that broker or	purchasers in broker or de (5) persons t	n connecti aler regist	on with sale ered with the	s of securitions SEC and/or	es in the offer r with a state	ering. If a p or states, li	erson to be st the name		
Ful	Name (Last name first, if individual)									
Bus	iness or Residence Address	(Number a	nd Street,	City, State, 2	Zip Code)					
Nar	ne of Associated Broker or Dealer			;=	_					
Sta	es in Which Person Listed Has Solicited or Inte	ends to Solicit	Purchasers							
	(Check "All States" or check individual State	:s)				***************************************	***************************************			
Į	AL] [AK] [AZ] [AR]		[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
•	IL] [IN] [IA] [KS]	-	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [NE] [NV] [NH]		[NM]	[NY]	[NC]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
	RI] [SC] [SD] [TN]	[TX]	[UT]	[VT]	[VA]	LWAI.		VYI J		
Ful	Name (Last name first, if individual)									
Bu	iness or Residence Address	(Number a	nd Street,	City, State, 2	Zip Code)					
Nai	ne of Associated Broker or Dealer									
Sta	es in Which Person Listed Has Solicited or Inte	ends to Solicit	Purchasers	<u> </u>					·-·	
	(Check "All States" or check individual State	:s)			,				☐ All	States
[AL] [AK] [AZ] [AR]		[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[H1]	[ID]
[IL] [IN] [IA] [KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
(MT] [NE] [NV] [NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI] [SC] [SD] [TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]
Ful	Name (Last name first, if individual)									
Bu	siness or Residence Address	(Number a	nd Street,	City, State, 2	Zip Code)				-	· · · · ·
Na	ne of Associated Broker or Dealer									
Sta	tes in Which Person Listed Has Solicited or Int	ends to Solicit	Purchasers	<u> </u>						
	(Check "All States" or check individual State	es)		***********		<i>.</i>			☐ All	States
[AL] [AK] [AZ] [AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(IL] [IN] [IA] [KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [NE] [NV] { NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
ſ	RILLISCE ISDE ITNE	f TX 1	r tit i	ו דע ז	f VA 1	f WA1	r wvi	(WL)	(WY)	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCI	EEDS	
	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\begin{array}{c} \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggreg Offering		Amount Already Sold
	Debt	\$		\$
	Equity	\$5,800,00		\$2,582,000
	☑ Common ☐ Preferred	-		
	Convertible Securities (including warrants)	s		s
	Partnership Interests	s		\$
	Other (Specify)	\$	_	\$
	Total	\$5,800,00	<u> </u>	\$ <u>2,582,000</u>
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offering under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Numb Investo		Aggregate Dollar Amount of Purchases
	Accredited Investors	31		\$2,582, <u>000</u>
	Non-accredited Investors	0		\$0
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of the securities in this offering. Classify securities by type listed in Part C - Question 1.			
	Type of offering	Type o Securi		Dollar Amount Sold
	Rule 505			
	Regulation A			
	Rule 504			
	Total			
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees	***************************************		\$ Ø
	Printing and Engraving Costs	***************************************		\$ Ø
	Legal Fees		×	\$20,000
	Accounting Fees	***************************************	×	\$5,000
	Engineering Fees	***************************************		\$ 0
	Sales Commissions (specify finders' fees separately)	*****		\$ 0
	Other Expenses (identify) blue sky filing fees		×	\$2,000
	Total		\boxtimes	\$27,000

	PRICE, NUMBER OF INVESTORS, EXP			DS	
Question 1 and total expenses furnished "adjusted gross proceeds to the issuer."	e aggregate offering price given in respons d in response to Part C - Question 4.a. This d	ifference is the			\$5,773,000
for each of the purposes shown. If the	sted gross proceeds to the issuer used or propose amount for any purpose is not known, furni estimate. The total of the payments listed to the forth set forth in response to Part C - Question	ish an estimate must equal the	•		
•	•		Payments to Officer Directors, & Affiliates	s,	Payments to Others
Salaries and fees		X	s		\$
Purchase of real estate			\$	X	\$
	tion of machinery and equipment		S		s
	ngs and facilities		\$		\$
Acquisition of other businesses (include offering that may be used in exchange	ling the value of securities involved in this for the assets or securities of another issuer	_	\$		\$
· · · · · · · · · · · · · · · · · · ·			\$ \$		\$
			\$ \$		\$
	equity financing		\$ <u>5,773,000</u>		\$
	county manering		\$5,773,000	×	\$
	added)		⊠ \$:	 5,773,000	
Total Payments Listed (column totals a	added)			5,775,000	
	D. FEDERAL SIGNATU	IDF			
The delivered this ration	to be signed by the undersigned duly au		son If this notice	is filed u	nder Rule 505, the
following signature constitutes an una	dertaking by the issuer to furnish to the hished by the issuer to any non-accredited	U.S. Securi	ties and Exchange	Commis	sion, upon written
Issuer (Print or Type)	Signature 0/		Date		
Stonewood UI, LLC	AM		September	_5, 20	08
Name of Signer (Print or Type)	Title of Signer (Print or Type)		.l		
Milton Pinsky	President of sole men	mber of s	sole member	of man	ager
			•		
	ATTENTION				
Intentional misstatemer	nts or omissions of fact constitute fede	ral crimina	violations. (See 1	8 U.S.C	. 1001.)
intentional missiatemen	IN OF AUTONOMO OF THAT ADMINISTRATE YEAR				

	E. STATE SIGNATURE			
1. Is the party described in 17 CFR 230.25 provisions of such rule	2 (c), (d), (e) or (f) presently subje	ct to any of the disqualification	Yes	No 🔀
	See Appendix, Column 5, for state	response.		
2. The undersigned issuer hereby undertakes Form D (17 CFR 239.500) at such times a	s to furnish to any state administrate as required by state law.	or of any state in which this notice	is filed, a	a notice on
3. The undersigned issuer hereby undertaken issuer to offerees.	s to furnish to the state administrato	rs, upon written request, informat	ion furnis	hed by the
4. The undersigned issuer represents that the Limited Offering Exemption (ULOE) of availability of this exemption has the burd	of the state in which this notice is	s filed and understands that the	itled to the issuer cla	ne Uniform aiming the
The issuer has read this notification and known undersigned duly authorized person.	ows the contents to be true and has d	uly caused this notice to be signed	on its be	half by the
Issuer (Print or Type)	Signature //	Date		
Stonewood UI, LLC	AM	September 5,	2008	
Name of Signer (Print or Type)	Title of Signer (Print or Type)			

President of sole member of sole member of manager

Instruction:

Milton Pinsky

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

[530429_2.DOC]

APPENDIX

1	Intend to non-ac investors (Part B-	to sell ccredited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)			under St (if yes explar waiver	5 lification ate ULOE s, attach lation of granted) litem 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ			` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `						
AR									
CA		X	\$5.8 M in Class A Membership Interests	1	\$58,000	0	0		X
со		х	\$5.8 M in Class A Membership Interests	1	\$90,000	0	0		х
СТ									1
DE									
DC								<u> </u>	
FL		x	\$5.8 M in Class A Membership Interests	1	\$58,000	0	0		Х
GA									
HI									<u></u>
ID					l. ,				
IL ·		X	\$5.8 M in Class A Membership Interests	25	\$2,231,000	0	0		х
IN									
lA									
KS					<u> </u>				
KY								<u> </u>	
LA			1				· · · · · · · · · · · · · · · · · · ·		
ME					1		·		
MD									<u> </u>
MA [530429					7 of 10				SEC 1972 (6/9

			T	<u>, , , , , , , , , , , , , , , , , , , </u>	· · · · · · · · · · · · · · · · · · ·				4
1	2 3				5 Disqualification				
	Intend	l to sell	Type of security and aggregate						
999	to non-a	ccredited	offering price		Type o	of investor and		explar	s, attach
	1	s in State -Item 1)	offered in state (Part C-Item 1)		amount p	urchased in State t C-Item 2)			granted) E-Item 1)
	(Fail B		(ran e-nem r)	.,	(, a,			(
C4-4-		No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
State MI	Yes	No		Investors	Amount	Hivestors	Amount	103	1
MN	<u> </u>								
MS		<u> </u>							
МО							<u>i</u>		
МТ									
NE									
NV									
NH									
NJ									
NM								ļ	
NY			, , , , , , , , , , , , , , , , , , ,						1
NC		,		1					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ND						_			<u> </u>
ОН		Х	\$5.8 M in Class A Membership Interests	2	\$87,000	0	0		х
ОК									
OR		<u> </u>			ļ			<u> </u>	<u> </u>
PA		<u> </u>		<u> </u>	<u> </u>				
RI			<u></u>						<u> </u>
SC		х	\$5.8 M in Class A Membership Interests	1	\$58,000	0	0		х
SD								<u> </u>	
TN							· · · · · · · · · · · · · · · · · · ·		
TX		ļ							
UT				<u> </u>					
VT	<u> </u>				<u> </u>			ļ <u> </u>	
VA		-		<u> </u>				<u> </u>	
WA					1	1]

1	Intend to non-a	2 I to sell ccredited s in State	Type of security and aggregate offering price offered in state			4 f investor and archased in State		under St (if yes explan waiver	5 lification ate ULOE s, attach ation of granted)
	(Part B	-Item 1)	(Part C-Item 1)		(Part C-Item 2)			(Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
wy							NA		
WI									
WY							<u> </u>		
PR									

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer of Man	ager Director	☐ Manager
Full Name (Last name first, i	f individual)				
Banner RH, LLC					
Business or Residence Addre	ss (Number	and Street, City, State, Zip C	Code)		
c/o Banner Property M	anagement, LLC,	500 Skokie Blvd., Nort	hbrook, IL 60062		
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	Director	Manager
Full Name (Last name first,	if individual)				
Stonewood Manager, L					
Business or Residence Add		r and Street, City, State, Zip			
c/o Banner Property M	anagement, LLC	500 Skokie Blvd., Nort	hbrook, IL 60062		
Check Box(es) that Apply:		■ Beneficial Owner	☐ Executive Officer of M	anager 🔲 Directo	r Manager
Full Name (Last name first,	if individual)				
BA Holding III,, LLC		<u></u>			
Business or Residence Add	ress (Numbe	r and Street, City, State, Zip	Code)		
c/o Ranner Property M	anagement, LLC	. 500 Skokie Blvd., Nort	hbrook, IL 60062		

END